# PATENT APPLICATION FEE DETERMINATION RECORD
## Effective December 8, 2004

**Application or Docket Number** 10/538926

## CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) | SMALL ENTITY TYPE ☐ | | OR OTHER THAN SMALL ENTITY | |
|---|---|---|---|---|---|---|
| | | | RATE | FEE | RATE | FEE |
| U.S. NATIONAL STAGE FEES | | | | | | |
| BASIC FEE | SMALL ENT. = $ 150 | LARGE ENT. = $ 300 | BASIC FEE | | OR BASIC FEE | 300 00 |
| EXAMINATION FEE | Satisfies PCT Article 33(1)-(4) = $ 50 / $ 100 | All other situations = $ 100 / $ 200 | EXAM. FEE | | EXAM. FEE | 100 00 |
| SEARCH FEE | U.S. is ISA = $ 50 / $ 100 ALL other countries = $ 200 / $ 400 | All other situations = $ 250 / $ 500 | SEARCH FEE | | SEARCH FEE | 4.00 00 |
| FEE FOR EXTRA SPEC. PGS. | minus 100 = | / 50 = | X $ 125 = | | X $ 250 = | |
| TOTAL CHARGEABLE CLAIMS | 3 minus 20 = | * | X $ 25 = | | OR X $ 50 = | |
| INDEPENDENT CLAIMS | 2 minus 3 = | * | X $ 100 = | | OR X $ 200 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | ☐ | + $ 180 = | | OR + $ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | TOTAL | | OR TOTAL | |

## CLAIMS AS AMENDED - PART II

### AMENDMENT A

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | SMALL ENTITY RATE | ADDI-TIONAL FEE | OR OTHER THAN SMALL ENTITY RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|
| Total | * | Minus ** | = | X $ 25 = | | OR X $ 50 = | |
| Independent | * | Minus *** | = | X $ 100 = | | OR X $ 200 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | + $ 180 = | | OR + $ 360 = | |
| | | | | TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

### AMENDMENT B

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | RATE | ADDI-TIONAL FEE | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|
| Total | * | Minus ** | = | X $ 25 = | | OR X $ 50 = | |
| Independent | * | Minus *** | = | X $ 100 = | | OR X $ 200 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | + $ 180 = | | OR + $ 360 = | |
| | | | | TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".